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| BLOOMFIELD HILLS, MI 48303 | | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571)273-2885, on the date indicated below. | | | |
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| APPLICATION NO. | FILING DATE | FILING DATE | | R | ATTORNEY DOCKET NO. CONFIR | | CONFIRMATION NO. |
| 10/590,240 | 09/25/2006 | | Tsuyoshi Saito | 6340-000078/N | | 0078/NP | 6748 |
| TITLE OF INVENTION: | MOTOR-DRIVE | N WHEEL DRIVIN | G APPARATUS | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUI | | UE FEE TO | TAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1510 | \$300 | \$0 | | \$1810 | 06/19/2009 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | |
| LE, DAVID D 3655 475-175000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list | | | | | | | |
| Address form PTO/SI "Fee Address" i PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Un | indication (or "Fee Ad 22 or more recent) attack ND RESIDENCE DAT less an assignee is ident | (2) the name of a single registered patent attorned to 2 registered patent listed, no name will be THE PATENT (print or data will appear on the page 1.5). | agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agents and the name of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. HE PATENT (print or type) ta will appear on the patent. If an assignee is identified below, the document has been filed for | | | | |
| recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitution for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | Y) | . , |
| NTN Corpora | | ` | Japan | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | |
| | | | | | | | |
| 4a. The following fee(s) are submitted: | | | b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-0750 (enclose an extra copy of this form). | | | | |
| 5. Change in Entity Stat | tus (from status indicated as SMALL ENTITY status | above) See 37 CFR 1.27. | b. Applicant is no lo | nger claiming SMA | LL ENTITY st | tatus. See 37 CFR | . 1.27(g)(2). |
| NOTE: The Issue Fee an | d Publication Fee (if requ | | from anyone other than t | • | | | |
| Authorized Signature | | Date <u>June 3, 2009</u> | | | | | |
| Typed or Printed Name | W.R. Duke Taylo | | Registration No. 31,306 | | | | |
| an application. Confident submitting the complete this form and/or suggest Box 1450, Alexandria, 1450, Alexandria, Virgin | tiality is governed by 35 application form to the ions for reducing this bu Virginia 22313-1450. Enia 22313-1450. | U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES O | 1.14. This collection is e depending upon the indi | stimated to take 12 vidual case. Any c cer, U.S. Patent and S TO THIS ADDF | minutes to co comments on t I Trademark C RESS. SEND | omplete, including the amount of tim Office, U.S. Depa TO: Commission | by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. oner for Patents, P.O. Box number. |